



# LRA

LIBERIA REVENUE AUTHORITY

**ET01**  
**Domestic Tax**  
**Department**  
 Rev. April  
 2015

## EXCISE TAX RETURN FORM

Fields with \* are mandatory, dates in MM/DD/YYYY  
 Please keep a copy for your records

**Instructions:**  
 1. Use this form to file monthly excise taxes

### 1. TAXPAYER & SUMMARY

<b>1a. Tax Division*:</b>		<b>1b. TIN* (must start with 5):</b>				<b>1c. Total Excise*:</b>		
		5						
<b>1d. Tax:</b> Excise	<b>1e. Tax Period</b>			<b>1f. Currency*:</b>		<b>1g. Total Excise*:</b>		
<b>1h. Address:</b>	<b>1i. Email:</b>			<b>1j. Business Telephone:</b>		<b>1k. Mobile Telephone:</b>		

### 2. EXCISE TAX DETAILS

No	2a. Excise Type	2b. Rate	2c. Gross Sales	2d. Export Sales	2e. Other exempt Sales/Service	2f. Taxable Sales/Services	2g. Excise
1	Earth and Stone; Asbestos Product Manufactured in Liberia	35%					
2	Scrap Metal Exported From Liberia	5%					
3	Alcoholic Beverages Produced in Liberia	35%					
4	Tobacco and Tobacco Products Manufactured in Liberia	35%					
5	Non-Alcoholic Beverages and Water Produced in Liberia	2%					
6	Cosmetics Produced in Liberia	8%					
7	Luxury Automobiles and Jewelry Manufactured in Liberia	10%					
8	Gambling Equipment Manufactured in Liberia	30%					

### 3. PAYMENT

<b>3a. Amount On Hand to Pay</b>	
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### 4. CERTIFICATION

I certify that the information given above is true, accurate and complete to the best of my knowledge. I also understand that any false declaration may lead to prosecution.

<b>4a. CFO Full Name*</b>	<b>4b. Signature*</b>		
	<b>4c. Date*</b>	<b>4d. Telephone #*</b>	
<b>4e. CEO Full Name*</b>	<b>4f. Signature*</b>		
	<b>4g. Date*</b>	<b>4h. Telephone #*</b>	

### FOR OFFICIAL USE ONLY

Received by	Date	Signature	Document No.	Validated by	Date	Signature